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Roberta A. Winzeler

(Name)

Roberta A. Winzeler

(Signature)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Masayuki Katogi et al.)	Group Art Unit: 2875
)	
Serial No.: 09/989,997)	Examiner: Bertrand Zeade
)	
Filing Date: November 21, 2001)	Attorney Docket: 1-15604
)	
For: COLOR ILLUMINATION DEVICE)	
)	
)	

March 18, 2004

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AMENDMENT UNDER 37 C.F.R. 1.116

Honorable Sir:

Responsive to the Examiner's Office Action of December 19, 2003, the applicants respectfully request to amend the above-identified application after final rejection.

Amendments to the Claims are reflected in the listing of claims, which begins on page 2 of this paper.

Remarks begin on page 7 of this paper.



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PTO/SB/21 (02-04)

Approved for use through 07/31/2006. OMB 0651-0031
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/989,997	
	Filing Date	November 21, 2001	
	First Named Inventor	Masayuki Katogi	
	Art Unit	2875	
	Examiner Name	Bertrand Zeade	
Total Number of Pages in This Submission	18	Attorney Docket Number	1-15604

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Postcard
<div>Remarks</div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	MARSHALL & MELHORN, LLC.
Signature	Donald A. Schurr, Reg. No. 34,247
Date	March 18, 2004

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